

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation DEFENDERS OF WILDLIFE ACTION FUND		3. FEC Identification Number <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C90007907 </div>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1130 17TH ST NW		
(c) City, State and ZIP Code WASHINGTON DC 20036		
2. Corporate filers only Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Individual filers only Name of Employer Occupation	

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☒ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM M M / D D / Y Y Y Y
0 8 / 1 2 / 2 0 0 8

THROUGH

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8

6. TOTAL CONTRIBUTIONS00

7. TOTAL INDEPENDENT EXPENDITURES..... 14114.37

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM**SIGNATURE****DATE**

William Lutz

08/15/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 / 7

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Office Deopt

Date

M M / D D / Y Y Y Y
0 8 / 1 2 / 2 0 0 8Mailing Address
3500 S College Ave

Amount

8.53

City
Fort CollinsState
CO

Zip Code

Purpose of Expenditure
suppliesCategory/
Type

Office Sought:

☒ House

State: CO

House

☐ Senate☐ President

District: 04

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Marilyn MusgraveCalendar Year-To-Date Per Election
for Office Sought

2185.14

Disbursement For:
2008☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
QWEST

Date

M M / D D / Y Y Y Y
0 8 / 1 2 / 2 0 0 8Mailing Address
PO Box 173638

Amount

621.15

City
DenverState
COZip Code
80217Purpose of Expenditure
phone and internetCategory/
Type

Office Sought:

☒ House

State: CO

House

☐ Senate☐ President

District: 04

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Marilyn MusgraveCalendar Year-To-Date Per Election
for Office Sought

621.15

Disbursement For:
2008☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Crown Pub

Date

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 8Mailing Address
134 S. College Ave

Amount

38.47

City
Fort CollinsState
COZip Code
80524Purpose of Expenditure
lunch meetingCategory/
Type

Office Sought:

☒ House

State: CO

House

☐ Senate☐ President

District: 04

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Marilyn MusgraveCalendar Year-To-Date Per Election
for Office Sought

202.12

Disbursement For:
2008☐ Primary☒ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

668.15

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

Image# 28991719300
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE **3 / 7**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Office Depot

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	0	8

Mailing Address
3500 S College Ave

Amount

124.95

City
Fort Collins

State
CO

Zip Code

Purpose of Expenditure
supplies

Category/
Type

Office Sought:

☒

House

State: CO

House

☐

Senate

☐

President

District: 04

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Marilyn Musgrave

Calendar Year-To-Date Per Election
for Office Sought

2185.14

Disbursement For:
2008

☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Pizza Hut

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	0	8

Mailing Address
2567 S Shields #B

Amount

21.51

City
Fort Collins

State
CO

Zip Code
80526

Purpose of Expenditure
pizza for canvassers

Category/
Type

Office Sought:

☒

House

State: CO

House

☐

Senate

☐

President

District: 04

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Marilyn Musgrave

Calendar Year-To-Date Per Election
for Office Sought

307.53

Disbursement For:
2008

☐

Primary

☒

General

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
7-Eleven

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	0	8

Mailing Address
2800 S College Ave

Amount

40.00

City
Fort Collins

State
CO

Zip Code
80525

Purpose of Expenditure
gas

Category/
Type

Office Sought:

☒

House

State: CO

House

☐

Senate

☐

President

District: 04

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Marilyn Musgrave

Calendar Year-To-Date Per Election
for Office Sought

270.96

Disbursement For:
2008

☐

Primary

☒

General

☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

186.46

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **4 / 7**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
AT&T

Date

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 8Mailing Address
PO Box 8100

Amount

200.00

City
AuroraState
ILZip Code
60507Purpose of Expenditure
staff cell phone billsCategory/
Type

Office Sought:

☒ House

State: CO

House

☐ Senate☐ President

District: 04

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Marilyn MusgraveCalendar Year-To-Date Per Election
for Office Sought

300.00

Disbursement For:
2008☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
7-Eleven

Date

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 8Mailing Address
2800 S College Ave

Amount

40.00

City

Fort Collins

State
COZip Code
80525Purpose of Expenditure
gasCategory/
Type

Office Sought:

☒ House

State: CO

House

☐ Senate☐ President

District: 04

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Marilyn MusgraveCalendar Year-To-Date Per Election
for Office Sought

270.96

Disbursement For:
2008☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Wil Lutz

Date

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8Mailing Address
2321 S 2nd St

Amount

343.38

City

Arlington

State
VAZip Code
22204Purpose of Expenditure
salaryCategory/
Type

Office Sought:

☒ House

State: CO

House

☐ Senate☐ President

District: 04

Check One:

☐ Support☒ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Marilyn MusgraveCalendar Year-To-Date Per Election
for Office Sought

715.38

Disbursement For:
2008☐ Primary☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

583.38

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5 / 7

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee
Pizza Hut

Date

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 8Mailing Address
2567 S Shields #B

Amount

City State Zip Code
Fort Collins CO 80526

36.38

Purpose of Expenditure
pizza for canvassersCategory/
TypeOffice Sought: ☒ House State: CO
House ☐ Senate District: 04
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Marilyn MusgraveCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 307.53Disbursement For: ☐ Primary ☒ General
2008
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Ed Yoon

Date

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8Mailing Address
146 S Oxford Ave #1

Amount

City State Zip Code
Los Angeles CA 90004

2560.00

Purpose of Expenditure
salaryCategory/
TypeOffice Sought: ☒ House State: CO
House ☐ Senate District: 04
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Marilyn MusgraveCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 36406.59Disbursement For: ☐ Primary ☒ General
2008
☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
David Kirk

Date

M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8Mailing Address
3017 Stevenson Place NW

Amount

City State Zip Code
Washington DC 20015

1120.00

Purpose of Expenditure
salaryCategory/
TypeOffice Sought: ☒ House State: CO
House ☐ Senate District: 04
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Marilyn MusgraveCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 3360.00Disbursement For: ☐ Primary ☒ General
2008
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

3716.38

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **6 / 7**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee

Rhey Lee

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	8

Mailing Address

2733 Andreo Ave

Amount

3840.00

City

Torrance

State

CA

Zip Code

90501

Purpose of Expenditure

salary

Category/
Type

Office Sought:

☒

House

State: CO

House

☐

Senate

District: 04☐

President

Check One:

☐

Support

☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Marilyn Musgrave

Calendar Year-To-Date Per Election
for Office Sought

11686.50

Disbursement For:
2008☐

Primary

☒ General☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Greg Gordon

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	8

Mailing Address

3800 East 29th St #5

Amount

1920.00

City

Bryan

State

TX

Zip Code

77802

Purpose of Expenditure

salary

Category/
Type

Office Sought:

☒

House

State: CO

House

☐

Senate

District: 04☐

President

Check One:

☐

Support

☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Marilyn Musgrave

Calendar Year-To-Date Per Election
for Office Sought

5952.50

Disbursement For:
2008☐

Primary

☒ General☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Liam Flynn

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	8

Mailing Address

300 East Rich St #914

Amount

1600.00

City

Columbus

State

OH

Zip Code

43215

Purpose of Expenditure

salary

Category/
Type

Office Sought:

☒

House

State: CO

House

☐

Senate

District: 04☐

President

Check One:

☐

Support

☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Marilyn Musgrave

Calendar Year-To-Date Per Election
for Office Sought

3200.00

Disbursement For:
2008☐

Primary

☒ General☐ Other (specify)(a) **SUBTOTAL** of Itemized Independent Expenditures

7360.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 7 / 7

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee

Barbara Swietkowski

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	8

Mailing Address

80 Hughson Rd

Amount

1600.00

City

Carmel

State

NY

Zip Code

10512

Purpose of Expenditure

salary

Category/
Type

Office Sought:

☒

House

State: CO

House

☐

Senate

☐

President

District: 04

Check One:

☐

Support

☒

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Marilyn Musgrave

Calendar Year-To-Date Per Election
for Office Sought

3543.98

Disbursement For:
2008☐

Primary

☒

General

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

1600.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

(carry total from last page forward to Line 7)

14114.37